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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/550,026
Applicant : Albihts Stockholm AB
Filed : September 23, 2005
Title : COMPOSITION COMPRISING ISCOM PARTICLES
AND LIVE MICRO-ORGANISMS

Docket No. : 41848 Customer No. : 000116

LETTER

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is the Power of Attorney and Correspondence Address Indication Form PTO/SB/81 for the above-identified application.

If there are any fees required by this communication, please charge such fees to our Deposit Account No. 16-0820, Order No. 41848.

Respectfully submitted,
PEARNE & GORDON LLP



Ronald M. Kachmarik, Registration No. 34512

1801 East 9th Street
Suite 1200
Cleveland, Ohio 44114-3108
(216) 579-1700

April 20, 2007

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.

Ronald A. Kachmarick
Name of Attorney


Signature of Attorney

04/20/2007
Date



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PTO/SB/81 (01-06)

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/550026
Filing Date	September 23, 2005
First Named Inventor	Bror Moren
Title	Composition Comprising Iscom....
Art Unit	
Examiner Name	
Attorney Docket Number	41848

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

000116

OR

☐ Practitioner(s) named below:

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City	Cleveland	State	Ohio	Zip	44114-3108
Country	USA				
Telephone	216-579-1700	Email	lp@pearmegordon.com		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Bengt Falk</i>	Date	2007-04-09
Name	Bengt Falk	Telephone	+4618572402
Title and Company	Isconova AB, CEO		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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